

Direct Deposit Agreement Form

Authorization Agreement

I hereby authorize **Valero Energy Corporation** and/or its subsidiaries to initiate automatic deposits to my account at the financial institution named below.

Further, I agree not to hold **Valero Energy Corporation** and/or its subsidiaries responsible for any delay or loss of funds due to incorrect or incomplete information supplied by me or by my financial institution or due to an error on the part of my financial institution in depositing funds to my account.

This agreement will remain in effect until **Valero Energy Corporation** and/or its subsidiaries receives a written notice of cancellation from me or my financial institution, or until I submit a new direct deposit form to the Treasury Department.

Account Information (Please print or type financial information) Owner Number Name of Company or Owner Name of Financial Institution: Routing Number: Checking Savings Account Type Account Number: **Signature** Authorized Signature _____ Date Printed Name Phone Number Please provide an e-mail or fax number where you would like the remittance advice sent. If you leave both boxes blank, your payment detail will come by mail. Email: _____ Fax: _____ Please return this form to your Valero contact. For Internal Use Only: "I have verified the bank details with a telephone call to_____(phone #) to my known vendor point of contact _____(name) on _____(date) at _____(time)." Completed by: Signature /date: _____ Printed name: _____ Extension/Phone #: _____